

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2015 Election

FILED
DESOTO COUNTY, MS

JUL 28 2015

Delbert X. Hosemann
CIRCUIT COURT CLERK

Name of Candidate Ray Laughter
Address 8124 Bethel Road County Desoto
Telephone (Work) _____ (Home) 901-487-5848 (Fax) _____
Contact Name Ray Laughter Email Address laughter4chanceryclerk@gmail.com
Office Sought Desoto County Chancery Clerk Political Party Republican

☐ Check here if above is different from previous report

TYPE OF REPORT

____ May 8, 2015 Periodic Report (January 1, 2015, through April 30, 2015)Mandatory
____ June 10, 2015 Periodic Report (May 1, 2015, through May 31, 2015)Mandatory
____ July 10, 2015 Periodic Report (June 1, 2015, through June 30, 2015)Mandatory
X July 28, 2015 Pre-Election Report (July 1, 2015, through July 25, 2015)Mandatory
All Primary Candidates and Political Committees
____ August 18, 2015 Pre-Election Report (July 26, 2015, through August 15, 2015)Runoff Candidates Only
All Primary Candidates and Political Committees in a Runoff Election
____ October 9, 2015 Periodic Report (July 1, 2015, through September 30, 2015)Mandatory
____ October 27, 2015 Pre-Election ReportMandatory
(Primary Election Winners report October 1, 2015, through October 24, 2015)
(Independent Candidates report January 1, 2015 through October 24, 2015) All Candidates and Political Committees
____ November 17, 2015 Pre-Runoff Report (October 25, 2015, through November 14, 2015)Runoff Candidates Only
All Candidates and Political Committees in a Runoff Election
____ January 8, 2016 Periodic Report (October 1, 2015, through December 31, 2015)Mandatory
____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The Secretary of State must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

Itemized	+	Non-Itemized	This Period	Calendar year-to-date
Total amount of contributions \$ 3200.00	+	\$ 75.00	\$ 3275.00	\$ 25,569.60
Total amount of disbursements \$ 916.39	+	\$ 2.48	\$ 918.87	\$ 22,931.96
Total amount of cash on hand			\$ 2,363.64	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Candidate

July 28, 2015
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO:

1. Candidates for Statewide, State-District, Multi-County and all Legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to (601) 576-2545
2. Candidates for Countywide and County-District offices should return forms to their County Circuit Clerk
3. Candidates for Municipal office should return forms to the Municipal Clerk

Name of Candidate or Committee Ray Laughter
 Reporting period July 1, 2015 through July 25, 2015

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	<u>Ray Laughter</u>	<u>07</u> / <u>21</u> / <u>15</u>	\$ <u>1000.00</u>
Mailing Address	<u>8124 Bethel Road</u>	<u>07</u> / <u>22</u> / <u>15</u>	\$ <u>1500.00</u>
City, State, Zip Code	<u>Olive Branch, MS 38654</u>	<u>07</u> / <u>23</u> / <u>15</u>	\$ <u>700.00</u>
Name of Employer (Required)	<u>Desoto County</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required)	<u>Environmental Manager</u>	Aggregate year-to-date	\$ <u>5350.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Mailing Address	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required)	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required)	_____	Aggregate year-to-date	\$ <u> </u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Mailing Address	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required)	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required)	_____	Aggregate year-to-date	\$ <u> </u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Mailing Address	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required)	_____	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required)	_____	Aggregate year-to-date	\$ <u> </u>

Name of Candidate or Committee Ray LaughterReporting period July 1, 2015 through July 25, 2015

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Vista Print		
Mailing Address	<u>07</u> / <u>22</u> / <u>15</u>	\$ 139.97
95 Hayden Avenue		
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Lexington, MS 02421		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1491.96
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Victorystore.com		
Mailing Address	<u>07</u> / <u>24</u> / <u>15</u>	\$ 276.42
5200 SW 30th Street		
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Davenport, IA 52802		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1620.38
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
P H Publishing		
Mailing Address	<u>07</u> / <u>24</u> / <u>15</u>	\$ 500.00
2445 Highway 51 South		
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Hernando, MS 38632		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$